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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing OR ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number

MOR-0241/HD0002 US

First Named Inventor

Luigi Grasso

COMPLETE IF KNOWN

Application Number

Filing Date

07/21/2003

Art Unit

Examiner Name

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Methods for Generating Enhanced Antibody-Producing Cell Lines with Improved Growth Characteristics

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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DECLARATION**ADDITIONAL INVENTOR(S)****Supplemental Sheet**Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Nicholas C.		Family Name or Surname Nicolaidis	
Inventor's Signature		Date	
Residence: City Boothwyn	PA State	USA Country	USA Citizenship
Mailing Address 4 Cider Mill Court			
Mailing Address			
City Boothwyn	PA State	19061 ZIP	USA Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Philip M.		Family Name or Surname Sass	
Inventor's Signature		Date	
Residence: City Audubon	PA State	USA Country	USA Citizenship
Mailing Address 1903 Black Hawk Circle			
Mailing Address			
City Audubon	PA State	19403 ZIP	USA Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/>		Customer Number or Bar Code Label	<input type="text"/>	OR <input checked="" type="checkbox"/>	Correspondence address below	
Patrick J. Farley						
Name						
Morphotek Inc.						
Address						
210 Welsh Pool Road						
Exton			PA	19341		
City			State	ZIP		
United States		(610) 423-6100		(610) 423-6199		
Country		Telephone		Fax		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR :			<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name Luigi (first and middle [if any])			Family Name Grasso or Surname			
Inventor's Signature					Date	
Bala Cynwyd		PA	USA	Italy		
Residence: City		State	Country	Citizenship		
707 Conshohocken State Road						
Mailing Address						
Bala Cynwyd		PA	19004	USA		
City		State	ZIP	Country		
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name J. Bradford (first and middle [if any])			Family Name Kline or Surname			
Inventor's Signature					Date	
Norristown		PA	USA	USA		
Residence: City		State	Country	Citizenship		
3210 Sunset Avenue						
Mailing Address						
Norristown		PA	19403	USA		
City		State	ZIP	Country		
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.						